Florida Department of State

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(((H17000316655 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : STEINBERG GARELLEK P.L.

Account Number : [20110000015 : (5€1)391~3344 Phone

Fax Number : (561)948-4713

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

ALLAND TO H

Foreign Limited Liability Company VC 1528 LLC

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902,	FLORIDA STATUTES,	THE FOLLOWING.	IS SUBMITTED TO	REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO	OTRANSACT BUSINES	S IN THE STATE OF	FLORIDA:	

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.	
	C.," or "LLC")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternability Company," "L.L.C," or "LLC.")	nate some must include "Limited
2 DELAWARE 3. N/A	
(Jurisdiction under the law of which foreign limited liability (FEI number, if company is organized)	applicable)
4.	- 22
(Data first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	17:
5. 2431 ATLANTIC AVENUE, SUITE 1	
MANASQUAN, NJ 08736	<u> </u>
(Struct Address of Principal Office)	5:
6. 2431 ATLANTIC AVENUE, SUITE 1	Ġ.
MANASQUAN, NJ 08736	· · · · · · · · · · · · · · · · · · ·
(Mailing Address)	
	to manage is/are:
(Meiling Address)	
7. The name, title or capacity and address of the person(s) who has/have authority	AND SECRETARY),
7. The name, title or capacity and address of the person(s) who has/have authority ABRAHAM BLEEMAN (PRESIDENT), NATHAN BLEEMAN (VICE PRESIDENT	AND SECRETARY), (VICE PRESIDENT).

Dec 07 2017 12:39:22

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

850-617-6381

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d). FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED

AGENT IN THE STATE OF FLORIDA.		
1. The name of the Limited Liability Comp VC 1528 LLC	any is:	
If unavailable, the alternate to be used in the	e state of Florida is:	
2. The name and the Florida street address	of the registered agent and office are:	
SG REGISTE	RED AGENT LLC	
	(Name)	
200 E PALME	TTO PARK RD, #103	
Florida Street Ad	dress (P.O. Box NOT ACCEPTABLE)	
BOCA RATON	FL 33432 City/State/Zip	
	City/State/Zip	
Having been named as registered agent and liability company at the place designated in registered agent and agree to act in this cap statutes relating to the proper and complete accept the obligations of my position as reg Statutes.	this certificate, I hereby accept the appoint acity. I further agree to comply with the performance of my duties, and I am fan	e provisions of all miliar with and
(Sig	nature)	2011 626 - 7
\$ 100.00		
\$ 25.00 \$ 30.00		
\$ 5.00		7 1.15

<u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VC 1528 LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE THIRTIETH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VC 1528 LIC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

6636050 8300 .

SR# 20177309244

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Eulect, Servicianty of Elists

Authentication: 203656760

Date: 11-30-17

H17-0003166-553